

The CRAFFT Screening Questions - Appendix A

Please answer all questions honestly; your answers will be kept confidential.

Part A

During the **PAST 12 MONTHS**, did you:

No

Yes

1. Drink any alcohol (more than a few sips)?

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2. Smoke any marijuana or hashish?

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3. Use anything else to get high?

☐☐

“Anything else” includes illegal drugs, over the counter and prescription drugs, and things that you sniff or “huff”.

If you answered NO to ALL (A1, A2, A3) answer **only B1** below, then STOP.

If you answered YES to ANY (A1, to A3) answer **B1** to **B6** below.

Part B

No

Yes

1. Have you ever ridden in a **CAR** driven by someone (including yourself) who was “high” or had been using alcohol or drugs?

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2. Do you ever use alcohol or drugs to **RELAX**, feel better about yourself, or fit in?

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3. Do you ever use alcohol or drugs while you are by yourself, or **ALONE**?

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4. Do you ever **FORGET** things you did while using alcohol or drugs?

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5. Do your **FAMILY** or **FRIENDS** ever tell you that you should cut down on your drinking or drug use?

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6. Have you ever gotten into **TROUBLE** while you were using alcohol or drugs?

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The information on this page may be protected by special federal confidentiality rules (42 CFR Part 2), which prohibit disclosure of this information unless authorized by specific written consent. A general authorization for release of medical information is NOT sufficient.

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Contract For Life - Appendix B

A Foundation for Trust and Caring

This Contract is designed to facilitate communication between young people and their parents about potentially destructive decisions related to alcohol, drugs, peer pressure, and behavior. The issues facing young people today are often too difficult for them to address alone. SADD believes that effective parent-child communication is critically important in helping young adults to make healthy decisions.

Young Person

I recognize that there are many potentially destructive decisions I face every day and commit to you that I will do everything in my power to avoid making decisions that will jeopardize my health, my safety and overall well-being, or your trust in me. I understand the dangers associated with the use of alcohol and drugs and the destructive behaviors often associated with impairment.

By signing below, I pledge my best effort to remain free from alcohol and drugs; I agree that I will never drive under the influence; I agree that I will never ride with an impaired driver; and I agree that I will always wear a seat belt.

Finally, I agree to call you if I am ever in a situation that threatens my safety and to communicate with you regularly about issues of importance to both of us.

Young Person

PARENT (or Caring Adult)

I am committed to you and to your health and safety. By signing below, I pledge to do everything in my power to understand and communicate with you about the many difficult and potentially destructive decisions you face.

Further, I agree to provide for you safe, sober transportation home if you are ever in a situation that threatens your safety and to defer discussions about that situation until a time when we can both have a discussion in a calm and caring manner.

I also pledge to you that I will not drive under the influence of alcohol or drugs, I will always seek safe, sober transportation home, and I will always wear a seat belt.

Parent/Caring Adult

Students Against Destructive Decisions



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Abstinence Challenge - Appendix C

I, _____, agree to not drink alcohol, use drugs, or take anyone else's medication for the next _____ days. I also will not provide drugs, alcohol, or prescription medications for anyone else during this time. In addition, I agree to not drive a motor vehicle while under the influence of drugs or alcohol, nor will I ride with a driver who has been drinking or using drugs.

I will come to my follow-up appointment with _____ on _____.

Signed _____

Date _____